

| (Requestor's Name)                      |  |  |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |  |  |
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SECRETARY OF STATE DIVISION OF CORPORATION

# **COVER LETTER**

| Division of            | Corporations  |            |   |   |   |  |
|------------------------|---|------------|---|---|---|--|
| SUBJECT:               | UBJECT: SHORELINE INVESTORS, LLC  |            |   |   |   |  |
|                        | Name of Limi  | ited Liab  | ility Comp                                    | any   | <del></del>   |  |
| The enclosed Article   | es of Organization and fee(s) are   | submitt    | ed for filir                                  | ıg.   |   |  |
| Please return all corr | respondence concerning this ma  | tter to th | e followin                                    | g:  |   |  |
|                        | то  |            | WALKE   | R   |   |  |
|                        |   | Name e     | of Person                                     |   |   |  |
|                        | TODE  |            | ALKER,  | P.A.  |   |  |
|                        | Firm/Company  |            |   |   |   |  |
|                        | P.O. BOX 623275   |            |   |   |   |  |
| Address                |   |            |   |   |   |  |
|                        | OVIEDO, FL 32762  |            |   |   |   |  |
|                        | City/State and Zip Code   |            |   |   |   |  |
|                        | todd@   | ②todd\     | valkerpa                                      | a.com   |   |  |
|                        | E-mail address: (to be used   | for futur  | e annual rep                                  | ort notification  | n)  |  |
| For further informati  | on concerning this matter, pleas  | se call:   |   |   |   |  |
| TOD                    | D D. WALKER   | at (       | 407   | )   | 977-1667  |  |
| Name of Person         |   |            | Area Code & Daytime Telephone Number          |   |   |  |
| Enclosed is a checl    | c for the following amount:   |            |   |   |   |  |
| \$125.00 Filing Fe     | e \$\int\\$130.00 \text{ Filing Fee & Certificate of Status}                                      | Ce         | rtified Co                                    | ng Fee &<br>Py<br>y is enclosed   | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
|                        | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |            | Registrat<br>Division<br>Clifton E<br>2661 Ex | ourier Addi<br>ion Section<br>of Corporat<br>Building<br>ecutive Cent<br>see, FL 3230 | ions<br>er Circle   |  |

## ARTICLES OF ORGANIZATION OF SHORELINE INVESTORS, LLC

#### **ARTICLE I - NAME**

The name of this limited liability company is SHORELINE INVESTORS, LLC (the "Company").

## **ARTICLE II - PRINCIPAL OFFICE**

The mailing address and street address of the principal office of the Company is 1507 Park Center Dr., Unit 1H, Orlando, FL 32835.

### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 10 Windsormere Way, Suite 200, Oviedo, Florida 32765, and the name of the initial registered agent of the Company at that address is Todd D. Walker.

#### <u>ARTICLE IV - MANAGEMENT</u>

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.

Signature of a Member or an Authorized Representative of a Member

Todd D. Walker
Typed or Printed Name of Signer

Tiped Signature of A Member

Typed Signature of a Member

Typed or Printed Name of Signer

Typed Signature of A Member of Signature of A Member of a Member of Signature of Signatu

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated above, the undersigned hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and represents that he is familiar with, and accepts the obligations of, his position as registered agent as provided for in Chapter 608, Florida Statutes.

Todd D. Walker, Registered Agent